

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Smc		10/5/99
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	J.S.	69134	10-20-99

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
1	5-23-01
2	6-12-01
3	11-10-01
4	3-5-02
5	10-30-02
6	5-20-03
7	5-20-03
8	5-20-03
9	5-20-03
10	5-20-03
11	5-20-03
12	5-20-03
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39	5-20-03
40	5-20-03
41	5-20-03
42	5-20-03
43	5-20-03
44	5-20-03
45	5-20-03
46	5-20-03
47	5-20-03
48	5-20-03
49	5-20-03
50	5-20-03

Claim	Date
1	3-5-02
2	11-3-02
3	4-4-02
4	4-4-02
5	4-4-02
6	4-4-02
7	4-4-02
8	4-4-02
9	4-4-02
10	4-4-02
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41	4-4-02
42	4-4-02
43	4-4-02
44	4-4-02
45	4-4-02
46	4-4-02
47	4-4-02
48	4-4-02
49	4-4-02
50	4-4-02

Claim	Date
1	4-16-04
2	4-30-04
3	4-28-04
4	5-4-05
5	1-22-06
6	1-22-06
7	1-22-06
8	1-22-06
9	1-22-06
10	1-22-06
11	1-22-06
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14	1-22-06
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42	1-22-06
43	1-22-06
44	1-22-06
45	1-22-06
46	1-22-06
47	1-22-06
48	1-22-06
49	1-22-06
50	1-22-06

If more than 150 claims or 10 actions  
staple additional sheet here

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